



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL.: 587-0460 FAX: 587-0470

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LOBBYIST REGISTRATION FORM

(See back of this form for instructions)

(Type or Print Clearly)

STATE OF HAWAII
STATE ETHICS COMMISSION

PART I LOBBYIST

NAME (Last)	(First)	(Middle)	TELEPHONE
ASHMAN	JANET		487-5561
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
99-193 AIEA HEIGHTS DR, SUITE 300, AIEA, HI			96701-3911
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE		
HAWAII AGRICULTURE RESEARCH CENTER	487-5561		
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
99-193 AIEA HEIGHTS DRIVE SUITE 300, AIEA HI			96701-3911
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
STEPHANIE A. WHALEN		487-5561	
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
SAME			

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input checked="" type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy, Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Janet Ashman
(Signature of Lobbyist)

1/21/03
(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED		
STEPHANIE A. WHALEN	PRESIDENT-DIRECTOR		
NAME OF ORGANIZATION (if applicable)	TELEPHONE		
HAWAII AGRICULTURE RESEARCH CENTER	487-5561		
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
99-193 AIEA HEIGHTS DRIVE #300 AIEA HI			96701
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.			
<u>Stephanie A. Whalen</u> (Signature of Authorizing Officer or Person Represented)		<u>1/27/03</u> (Date)	